



To:

**Prospective Applicants for Discharges of Treated Groundwater, Potentially Contaminated Stormwater and/or Associated Wastewaters from Petroleum-Contaminated Sites, Areas or Containers**

Attached is a General Permit Notice of Intent (NOI) CGW-G for a Louisiana Pollutant Discharge Elimination System (LPDES) permit, authorized under EPA's delegated NPDES program under the Clean Water Act. To be considered complete, every item on the form must be addressed and the last page signed by an authorized company agent. If an item does not apply, please enter "NA" (for not applicable) to show that the question was considered.

Three copies (one original and two copies) of your completed NOI, each with a marked U.S.G.S. Quadrangle map or equivalent attached, should be submitted to:

Department of Environmental Quality  
Office of Environmental Services  
Post Office Box 4313  
Baton Rouge, LA 70821-4313  
Attention: Permits Division

Unless notified otherwise by the Secretary or his designee, owners/operators are authorized to discharge wastewater and/or stormwater under the terms and conditions of the permit upon the receipt of a hand-delivered, properly completed NOI to the Office of Environmental Services, Water and Waste Permits Division or 48 hours after the postmarked date stamped on the envelope that contains the properly completed NOI. The permittee is required to keep a copy of the NOI submitted to the Permits Division at the permitted facility. It should be kept with other records related to the permit and permit compliance.

According to L. R. S. 48:385, any discharge to a state highway ditch, cross ditch, or right-of-way shall require approval from:

Louisiana DOTD  
Office of Highways  
Post Office Box 94245  
Baton Rouge, LA 70804-9245  
(225) 379-1301

AND

Louisiana DHH  
Office of Public Health  
6867 Bluebonnet Road, Box 7  
Baton Rouge, LA 70810  
(225) 765-5044

For additional clarification concerning application requirements, please refer to LAC 33:IX Chapters 25 and 65. A copy of the LPDES regulations may be obtained from the Department's website at <http://www.deq.state.la.us/planning/regs/index.htm> or by contacting the Office of Environmental Assessment, Regulations Development Section, Post Office Box 4314, Baton Rouge, Louisiana 70821-4314, phone (225) 219-3550.

For questions regarding this NOI please contact the Water & Waste Permits Division at (225) 219-3181. For help regarding completion of this NOI please contact DEQ, Small Business Assistance at 1-800-259-2890.

Date \_\_\_\_\_  
Agency Interest No. AI \_\_\_\_\_  
LWDPS Permit No. WP \_\_\_\_\_  
NPDES/LPDES Permit LA \_\_\_\_\_

Please check:

<input type="checkbox"/>	Initial Permit
<input type="checkbox"/>	Permit Renewal
<input type="checkbox"/>	Existing Facility
<input type="checkbox"/>	Site Specific Coverage

**STATE OF LOUISIANA**  
**DEPARTMENT OF ENVIRONMENTAL QUALITY**  
*Office of Environmental Services, Water and Waste Permits Division*  
*Post Office Box 4313*  
*Baton Rouge, LA 70821-4313*  
*PHONE#: (225) 219-3181*

**LPDES NOTICE OF INTENT TO DISCHARGE TREATED GROUNDWATER,  
POTENTIALLY CONTAMINATED STORMWATER AND/OR  
ASSOCIATED WASTEWATERS FROM PETROLEUM-CONTAMINATED  
SITES, AREAS OR CONTAINERS.**  
(Attach additional pages if necessary.)

**SECTION I - FACILITY INFORMATION**

**A. Permit is to be issued to the following:** (must have operational control over the facility operations  
- see LAC 33:IX.2501.B and LAC 33:IX.2503.A and B).

1. Legal Name of Applicant (Company,  
Partnership, Corporation, etc.) \_\_\_\_\_

Facility Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Zip Code: \_\_\_\_\_

If applicant named above is not also the owner, state owner name, phone # and address.

\_\_\_\_\_

Please check status: ☐ Federal ☐ Parish ☐ Municipal  
☐ State ☐ Public ☐ Private ☐ Other: \_\_\_\_\_

2. Location of facility. Please provide a specific street, road, highway, interstate, and/or River  
Mile/Bank location of the facility for which the NOI is being submitted.

City \_\_\_\_\_ Zip Code: \_\_\_\_\_ Parish \_\_\_\_\_

Front Gate Coordinates:

Latitude- \_\_\_\_\_ deg. \_\_\_\_\_ min. \_\_\_\_\_ sec. Longitude- \_\_\_\_\_ deg. \_\_\_\_\_ min. \_\_\_\_\_ sec.

Method of Coordinate

Determination: \_\_\_\_\_

(Quad Map, Previous Permit, website, GPS)

Is the facility located on Indian Lands? ☐ Yes ☐ No

## SECTION I - FACILITY INFORMATION (cont.)

3. Name & Title of  
Contact Person at Facility \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_ e-mail \_\_\_\_\_

4. SIC (Standard Industrial Classification) Code(s): \_\_\_\_\_  
*SIC codes can be obtained from the U. S. Department of Labor internet site at <http://www.osha.gov/oshstats/sicser.html>*

### B. Name and address of responsible representative who completed the NOI:

Name & Title \_\_\_\_\_  
Company \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_ e-mail \_\_\_\_\_  
Address \_\_\_\_\_

### C. Discharges Requiring Approval from the Division of Historic Preservation:

If this NOI is being completed for a facility that has not yet been constructed, you should contact the *Louisiana State Historic Preservation Officer (SHPO), Office of Cultural Development at P. O. Box 44247, Baton Rouge, LA 70404* or telephone (225) 342-8170 to determine if construction activities or the proposed discharges will adversely affect properties listed or eligible for listing in the National Register of Historic Places

- ☐ This is an existing facility and no construction activities related to this NOI are proposed.  
This is a proposed facility and construction activities are not yet complete but I have obtained  
☐ approval from the State Historic Preservation Officer for the proposed construction activities.  
(You must keep a copy of the approval letter on file with your facility's permit records and compliance records.)

**NOTE:** If you have proposed construction and have not obtained the necessary approval from the Section 106 Review Coordinator for proposed construction activities at this site, then you are NOT ELIGIBLE for automatic coverage under this general permit. LPDES permit coverage cannot be obtained UNTIL you obtain written approval from the State Historic Preservation Officer for construction activities at the proposed site.

If construction activities will disturb one acre of land but less than five acres of land, you are required to have coverage under LPDES stormwater permit LAR200000. If construction activities will disturb five acres of land or more, you are required to have coverage under LPDES stormwater permit LAR100000.

## SECTION II – DISCHARGE INFORMATION

### A. Discharge Information

An Outfall is the point at which wastewater is monitored prior to mixing with other waters. An outfall can be identified either at the point that effluent discharges by pipe from a treatment plant or treatment system or the point at which effluent discharges into a roadside ditch, into a storm drain, or directly into a receiving water body such as a creek, coulee, bayou, canal or river. An internal outfall is an outfall for a waste stream that combines with other waste stream(s) before discharging into an external outfall. You should read Part I.B of the permit before completing this section of the NOI. The outfall number listed below corresponds to the outfall number listed in the permit, which is the only type of discharge permissible under this general permit. You should place an "X" in the column next to Outfall No 001 if there is only one permitted outfall at the site or facility. If more than one outfall occurs at a site or facility, then each separate outfall point should be clearly identified as Outfall No. 001A, 001B, 001D, etc...

Facility Discharge <sup>1</sup>	Outfall No <sup>2</sup>	Outfall Description	Outfall Location <sup>3</sup> (complete this column for each outfall that occurs at your facility)	Treatment <sup>4</sup>
	001	Treated Groundwater, Potentially Contaminated Stormwater and/or Associated Wastewaters		
	001A	Treated Groundwater, Potentially Contaminated Stormwater and/or Associated Wastewaters		
	001B	Treated Groundwater, Potentially Contaminated Stormwater and/or Associated Wastewaters		
	001C	Treated Groundwater, Potentially Contaminated Stormwater and/or Associated Wastewaters		
	001D	Treated Groundwater, Potentially Contaminated Stormwater and/or Associated Wastewaters		

## SECTION II – DISCHARGE INFORMATION (cont.)

<sup>1</sup>Place an "X" in the appropriate box(es) in this column for all outfalls that will occur at the permitted site.

<sup>2</sup>Outfall 001, should be used if you have only one outfall of this type of wastewater and/or storm water. Outfall 001A, 001B, 001C, 001D, etc., should be used in instances where you have more than one outfall of that type of wastewater and/or storm water. If you have five or more outfalls of any listed wastewater and/or storm water you should write in the appropriate Outfall No. (Outfall 001E, 001F, etc.) in one of the blank columns and fill in the outfall location for that discharge.

<sup>3</sup>This should be the point at which a sample of the discharge will be collected. Examples of outfall locations could be (but are not limited to): at the point of discharge from the settling basin located at the northeast corner of the facility; at the point of discharge from the washrack; at the southwest corner of the facility; or at the point of discharge from the STP located near the office building.

<sup>4</sup>List any treatment that is utilized prior to discharge. Write "None" if wastewater is not treated prior to discharge.

### B. If a new Discharge when do you expect to begin discharging?

\_\_\_\_\_

### C. Receiving Waters

Indicate how the wastewater reaches state waters (named water bodies). This will usually be either *directly*, by *open ditch* (if it is a highway ditch, indicate the highway), or by *pipe*. Please specifically name all of the minor water bodies that your wastewater will travel through on the way to a major water body. This information can be obtained from U.S.G.S. Quadrangle Maps. Include river mile of discharge point if available. If a waterbody is unnamed, identify it as unnamed.

Complete the discharge route and receiving stream information for all the outfalls at your facility. If all the outfalls discharge by the same route (i.e., open ditch) and into the same receiving stream, then you need only complete the first **Outfall Number(s)** section, however, you should list all the outfall numbers that you identified on page 4 of this form. If different outfalls discharge by different routes or into different receiving streams then complete as many of the **Outfall Number(s)** sections as necessary to properly characterized all outfalls. If you need additional space, please attach a separate sheet using the same format to supply the additional discharge route and receiving stream information for other outfalls.

Outfall Number(s) Applicable: \_\_\_\_\_

By \_\_\_\_\_ (effluent pipe, ditch, etc.);

thence into \_\_\_\_\_ (Parish drainage ditch, canal, etc.);

thence into \_\_\_\_\_ (named bayou, creek, stream, etc.);

thence into \_\_\_\_\_ (river, lake, etc.).

Outfall Number(s) Applicable: \_\_\_\_\_

By \_\_\_\_\_ (effluent pipe, ditch, etc.);

thence into \_\_\_\_\_ (Parish drainage ditch, canal, etc.);

thence into \_\_\_\_\_ (named bayou, creek, stream, etc.);

thence into \_\_\_\_\_ (river, lake, etc.).

## SECTION II – DISCHARGE INFORMATION (cont.)

Outfall Number(s) Applicable: \_\_\_\_\_

By \_\_\_\_\_ (effluent pipe, ditch, etc.);

thence into \_\_\_\_\_ (Parish drainage ditch, canal, etc.);

thence into \_\_\_\_\_ (named bayou, creek, stream, etc.);

thence into \_\_\_\_\_ (river, lake, etc.).

Outfall Number(s) Applicable: \_\_\_\_\_

By \_\_\_\_\_ (effluent pipe, ditch, etc.);

thence into \_\_\_\_\_ (Parish drainage ditch, canal, etc.);

thence into \_\_\_\_\_ (named bayou, creek, stream, etc.);

thence into \_\_\_\_\_ (river, lake, etc.).

## SECTION III – MAPS/DIAGRAMS

- A. **Site Diagram.** Attach to this NOI a complete site diagram of your facility showing the boundaries of your facility, the location of all building and/or storage areas, the location of any treatment units (such as settling basins, wash racks, sewage treatment plants), and demonstrate how the wastewater flows through your facility into each clearly labeled discharge point. Indicate stormwater flow pattern on this diagram or provide additional diagrams if needed. Please indicate the location of the front gate or entrance to the facility on the site diagram.
- B. **Topographic Map.** Attach to this NOI a map or a copy of a section of the map which has been highlighted to show the path of your wastewater from your facility to the first named water body. Include on the map the area extending at least one mile beyond your property boundaries. Indicate the outline of the facility, the location of each of its existing and proposed discharge structures, and any existing hazardous waste treatment storage or disposal facilities.

A U.S.G.S. 1:24,000 scale map (7.5' Quadrangle) would be appropriate for this item. Appropriate maps can be obtained from local government agencies such as DOTD or the Office of Public Works. Maps can also be obtained online at <http://map.deq.state.la.us/> or [www.topozone.com](http://www.topozone.com). Private map companies can also supply you with these maps. If you cannot locate a map through these sources you can contact the Louisiana Department of Transportation and Development at:

1201 Capitol Access Road  
Baton Rouge, LA 70802  
(225) 379-1107  
[maps@dotd.louisiana.gov](mailto:maps@dotd.louisiana.gov)

- C. **Flow Diagram.** Attach a line drawing of the water flow through the facility with a water balance showing operations contributing wastewater to the effluent and treatment units. The water balance must show average and maximum flows at intake and discharge points and between units, including treatment units. If a water balance cannot be determined, the applicant may provide instead a pictorial description of the nature and amount of any sources of water and any collection and treatment measures. Hand drawn maps are acceptable.

## SECTION IV – COMPLIANCE HISTORY

Report the history of all violations and enforcement actions for the facility, a summary of all permit excursions including effluent violations reported on the facility's Discharge Monitoring Reports (DMRs) and bypasses for the last three years. Using a brief summary, report on the current status of all administrative orders, compliance orders, notices of violation, cease and desist orders, and any other enforcement actions either already resolved within the past 3 years or currently pending. The state administrative authority may choose, at its discretion, to require a more in-depth report of violations and compliance actions for the applicant covering any law, permit, or order concerning pollution at this or any other facility owned or operated by the applicant. If the facility has been inspected in the past three years, please provide the inspection date(s).

## SECTION V – LAC 33.I.1701 REQUIREMENTS

- A. Does the company or owner have federal or state environmental permits identical to, or of a similar nature to, the permit for which you are applying in other states? (This requirement applies to all individuals, partnerships, corporations, or other entities who own a controlling interest of 50% or more in your company, or who participate in the environmental management of the facility for an entity applying for the permit or an ownership interest in the permit.)

☐

Permits in Louisiana. List Permit Numbers: \_\_\_\_\_

☐

Permits in other states (list states): \_\_\_\_\_

☐

No other environmental permits.

- B. Do you owe any outstanding fees or final penalties to the Department? ☐ Yes ☐ No

If yes, please explain.

- C. Is your company a corporation or limited liability company? ☐ Yes ☐ No

If yes, is the corporation or LLC registered with the Secretary of State? ☐ Yes ☐ No

## SECTION VI – SITE HISTORY

- A. Date operations began at this site: \_\_\_\_\_

- B. Is the current operator the original operator? ☐ Yes ☐ No

According to the Louisiana Water Quality Regulations, LAC 33:IX.2503, the following requirements shall apply to the signatory page in this application:

#### Chapter 25. Permit Application and Special LPDES Program Requirements

##### 2503. Signatories to permit applications and reports

- A. All permit applications shall be signed as follows:
  - 1. For a corporation - by a responsible corporate officer. For the purpose of this Section responsible corporate officer means:
    - (a) A president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy- or decision-making functions for the corporation, or
    - (b) The manager of one or more manufacturing, production, or operating facilities employing more than 250 persons or having gross annual sales or expenditures exceeding \$25 million (in second-quarter 1980 dollars), if authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures.
  - 2. For a partnership or sole proprietorship - by a general partner or the proprietor, respectively; or
  - 3. For a municipality, parish, State, Federal or other public agency - either a principal executive officer or ranking elected official. For the purposes of this Section a principal executive officer of a Federal agency includes:
    - (a) The chief executive officer of the agency, or
    - (b) A senior executive officer having responsibility for the overall operations of a principal geographic unit of the agency (e.g., Regional Administrator of EPA).
- B. All reports required by permits, and other information requested by the state administrative authority shall be signed by a person described in LAC 33:IX.2503.A, or by a duly authorized representative of that person. A person is a duly authorized representative only if:
  - 1. The authorization is made in writing by a person described in LAC 33:IX.2503.A.
  - 2. The authorization specifies either an individual or a position having responsibility for the overall operation of the regulated facility or activity, such as a position of plant manager, operator of a well or well field, superintendent, position of equivalent responsibility, or an individual or position having overall responsibility for environmental matters for the company. (A duly authorized representative may thus be either a named individual or any individual occupying a named position); and
  - 3. The written authorization is submitted to the state administrative authority.
- C. Changes to authorization. If an authorization under LAC 33:IX.2503.B is no longer accurate because a different individual or position has responsibility for the overall operation of the facility, a new authorization satisfying the requirements of LAC 33:IX.2503.B must be submitted to the state administrative authority prior to or together with any reports, information, or applications to be signed by an authorized representative.
- D. Any person signing any document under LAC 33:IX.2503.A or B shall make the following certification:

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment for knowing violations."



## SIGNATORY AND AUTHORIZATION

Pursuant to the Water Quality Regulations (specifically LAC 33:IX.2503.A and B), which became effective October 20, 1995, the state NOI must be signed by a responsible individual as described in LAC 33:IX.2503.A and B and that person shall make the following certification:

"I certify under penalty of law that I have read and understand the Part I.A applicability/eligibility requirements for coverage under the general permit for discharges of treated groundwater, potentially contaminated stormwater and/or other associated wastewaters. To the best of my knowledge, my facility is eligible for coverage under this general permit and its operation will not result in a discharge of pollutants from sources not covered by the general permit, or otherwise authorized by another individual or general permit."

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment for knowing violations."

**Signature** \_\_\_\_\_

**Printed Name** \_\_\_\_\_

**Title** \_\_\_\_\_

**Company** \_\_\_\_\_

**Date** \_\_\_\_\_

**Telephone** \_\_\_\_\_

### CHECKLIST

To prevent any unnecessary delay in the processing of your notice of intent to be covered under the general permit, please take a moment and check to be certain that the following items have been addressed and enclosed:

1. ALL questions and requested information have been answered (N/A if the question or information was not applicable).
2. ALL required maps, drawings, and other reports are enclosed.
3. The appropriate person has signed the signatory page.
4. Please forward the original and two copies of this NOI.